PTO/SB/06 (08-03)

Approved for use through 7/31/2008. CMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application of Docket Number PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 CLAIMS AS FILED - PART I OTHER THAN OR SMALL ENTITY SMALL ENTITY (Column 1) (Column 2) FOR NUMBER FILED NUMBER EXTRA RATE FEE RATE FEE BASIC FEE : 385 (37 CFR 1.18(s)) OR TOTAL CLAIMS (37 CFR 1.16(c)) minus 20 = OR ENDEPENDENT CLAIMS (37 CFR 1.16(b)) mbus 3 OR MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) OR TOTAL \* If the difference in column 1 is less than zero, enter "O" in column 2. OR TOTAL CLAIMS AS AMENDED - PART II OTHER THAN OR (Column 2) (Column 3) (Column 1) SMALL ENTITY SMALL ENTITY **CLAIM9** HIGHEST NUMBER PRESENT REMAINING RATE ADDI-RATE ADDI EXTRA **AMENDMENT** AFTER PREVIOUSLY TIONAL TIONAL **PAD FOR AMENDMENT** FEE FEE . Total Minus (37 CFR 1.15(d) OR Independent evniM (37 OFR 1.160) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(d)) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST PRESENT REMAINING NUMBER RATE ADDI-RATE ADDL EXTRA PREVIOUSLY AFTER TIONAL TIONAL AMENDMENT PAID FOR FEE FEE Total Minus @7 OFR 1.16(a) OR Independent (AT CFR 1.16(b)) Minus OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (87 CFR 1.16(8)) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Cokenn 1) (Column 2) (Column 3) HIGHEST CLASMS Ç PRESENT REMAINING NUMBER RATE ADDI-RATE ADDI-AMENDMENT EXTRA AFTER PREVIOUSLY TIONAL TIONAL AMENDMENT PAID FOR FEE FEE Total Minus 8 (BY OFR LISICH) OR Independent Minus (FT CFR 1.16(b)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(6)) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.18. The information is required to obtain or retain a benefit by the public which is to fite (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Petent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

<sup>&</sup>quot;" If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3".

#### **FEE TRANSMITTAL**

## Electronic Version v08

Stylesheet Version v08.0

Title of invention

IMPROVED ILLUMINATION FOR COAXIAL VARIABLE SPOT HEADLIGHT

**Application Number:** 

Date:

First Named Applicant:

Mr. Jack Klootz

Attorney Docket Number:

10885.3802

# **TOTAL FEE AUTHORIZED \$ 385**

Patent fees are subject to annual revisions on or about October 1st of each year.

Filing as small entity

#### **BASIC FILING FEE**

Fee Description	Fee Code	Amount \$	Fee Paid \$		
Utility Filing Fee	2001	385	385		
Subtotal For Basic Filing Fees: \$ 385					

# **EXTRA CLAIM FEES**

Fee Description	Extra Claim	Fee Code	Amount \$	Fee Paid \$
Total Claims: 5	0	2202	9	O
Independent Claims: 2	0	2201	43	0
			Subtotal For Extr	a Claims Fees: \$ 0

## **AUTHORIZED BILLING INFORMATION**

The commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit account number:

131130

**Access Code** 

\*\*\*

Deposit name:

MalinHaleyDiMaggio;Crosby

Deposit authorized name:

Arlette J. Breakstone

Signature:

/arlette j breakstone/

Date (YYYYMMDD):

2004-08-17

Charge Any Additional Fee Required Under 37 C.F.R. Sections 1.16 and 1.17.